



administered by the



Alaska State Council on the Arts

Arts Educator Fellowship Final Evaluation and Accounting Report

Name: _____

Grant #: _____ **Phone:** _____

Email: _____ **Activity Dates:** _____

Activity Description: _____

INSTRUCTIONS:

1. Provide the following information on no more than two pages in no smaller than 11pt font.
 - a) Describe your program or project. What were the goals or anticipated outcomes?
 - b) How did you meet your goals/anticipated outcomes for the project?
 - c) How do you expect this experience to influence your art and education practice in the long term?
 - d) Did your project change from your original grant request? If so, please explain.
 - e) Did your final actual income and expenses vary more than 10% from your budget? If yes, please explain.
2. Complete the attached financial pages. "Actual" means the actual income and expenses for the project. Please include all revenue cash sources. "In-kind" income and expenses means the items for which the project received donations, such as food, housing, lodging, etc.
3. Complete the statistical information pages.
4. Please sign the back page. Keep a copy for your files and email/mail an original to the Alaska State Council on the Arts at laura.forbes@alaska.gov or 161 S Klevin St., Suite 102, Anchorage, AK, 99508.

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Actual Expenses	In the space below please detail all expenses associated with your proposed activity.	
	Expense Description	Amount
	Total Expenses	

Actual Revenues	In the space below please detail all sources of income to cover the cost of proposed activity. List "self" as source if using personal funds.	
	Sources of Funds for Project	Amount
	Total Applicant Funds	
	ARTS EDUCATOR FELLOWSHIP AWARD	
	Total Revenues	

In Kind Sources	Please list below sources and amounts of in-kind assistance you received for this project. In kind sources may include: free lodging, free meals: i.e., any expense that you received free that otherwise you would have paid for in cash.	
	Total In-kind Income and Expense	

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STATISTICAL INFORMATION: Please check the appropriate box below. The information on this form is required by the National Endowment for the Arts and helps us make federal funding available across Alaska. This information is only used for statistical purposes, and will not affect your application. Thank you for providing these important details

PROJECT DISCIPLINE

- ☐ **01 Dance**
☐ A Ballet
☐ B Ethnic/Jazz
☐ C Modern
☐ **02 Music**
☐ A Band
☐ B Chamber
☐ C Choral
☐ D New
☐ E Ethnic
☐ F Jazz
☐ G Popular
☐ H Solo/Recital
☐ I Orchestral
☐ **03 Opera/Musical Theatre**
☐ A Opera
☐ B Musical Theatre
☐ **04 Theatre**
☐ A Theatre, General
☐ B Mime
☐ D Puppet
☐ E Theatre for Young Audiences
☐ **05 Visual Arts**
☐ A Experimental
☐ B Graphics
☐ D Painting
☐ F Sculpture
☐ **06 Design Arts**
☐ A Architecture
☐ C Graphic
☐ **07 Crafts**
☐ A Clay
☐ B Fiber
☐ C Glass
☐ D Leather
☐ E Metal
☐ F Paper
☐ G Plastic
☐ H Wood
☐ I Mixed Media
☐ **08 Photography**
☐ **09 Media Arts**
☐ A Film
☐ B Audio
☐ C Video
☐ D Technology/Experimental Media
☐ **10 Literature**
☐ A Fiction
☐ B Non-Fiction
☐ C Playwriting
☐ D Poetry
☐ **11 Interdisciplinary**
☐ **12 Folklife/Traditional /Native Arts**
☐ A Folk/Traditional /Native Dance

- ☐ B Folk/Traditional/Native Music
☐ C Folk/Traditional /Native Crafts & Visual
☐ D Oral Traditions
☐ **13 Humanities**
☐ **14 Multidisciplinary**
☐ **15 Non-Arts/Non-Humanities**

ACTIVITY TYPE

EDUCATION

- 19__ Research/Planning
20__ School Residency
21__ Other Residency
22__ Seminar/Conference
27__ Translation
30__ Student Assessment
31__ Curriculum Development/Implementation

INDIVIDUAL

- 29__ Professional Development/Training
04__ Artwork Creation
09__ Identification/Documentation of Artwork
14__ Professional Support - Administrative
15__ Professional Support - Artistic
25__ Apprenticeship
99__ None of the Above

Project Race

- N__ American Indian/Alaska Native
A__ Asian
B__ Black/African American
H__ Hispanic/Latino
P__ Native Hawaiian/Pacific Islander
W__ White
99__ No single group

Project Descriptors-Please indicate if 50% or more of your project/include components of the following categories:

- A__ Accessibility
I__ International
P__ Presenting/Touring
T__ Technology
Y__ Youth at Risk
O__ Older Adults
H__ Health/Healing
E__ Economic Development
C__ Cultural/Heritage Tourism

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REPORTED BY

Name (printed) _____

Signature_____ Date_____

Checklist

- ☐ Final Report Form
- ☐ Final Report Narrative
- ☐ Final Accounting Page
- ☐ Statistical Pages
- ☐ Photographs of your program suitable for reproduction (please send SASE if you would like samples returned)
- ☐ Mail completed report to Alaska State Council on the Arts no later than 30 days after end of project.